

04/09/98



3540 U.S. PTO

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	BA-22580	Total Pages	45
	First Named Inventor or Application Identifier			
	HIROSHI HASEGAWA, ET AL			
	Express Mail Label No.	EM564188157US		

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 37] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets]</p> <p>4. Oath or Declaration [Total Pages 2]</p> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> [Note Box 5 below]<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). <p>5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i></p> <p>7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS	
8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
12. <input type="checkbox"/> Preliminary Amendment	
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Status still proper and desired	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
16. <input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No: 08 / 539,001

18. CORRESPONDENCE ADDRESS	
<input type="checkbox"/> Customer Number or Bar Code Label	or <input checked="" type="checkbox"/> Correspondence address below
<i>(Insert Customer No. or Attach bar code label here)</i>	

NAME	BUCKNAM AND ARCHER				
ADDRESS	600 OLD COUNTRY ROAD				
CITY	GARDEN CITY	STATE	NEW YORK	ZIP CODE	11530
COUNTRY	U.S.A.	TELEPHONE	(516)222-8885	FAX	(516)222-0135

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="margin: 0; font-size: small;">Note: Effective October 1, 1997. Patent fees are subject to annual revision.</p>		C mplete if Known	
TOTAL AMOUNT OF PAYMENT (\$) 1,982.00		Application Number	
		Filing Date	
		First Named Inventor HIROSHI HASEGAWA	
		Group Art Unit	
		Examiner Name	
		Attorney Docket Number BA-22580	

<h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number </p> <p>Deposit Account Name </p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other </p> <h3 style="text-align: center; margin: 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <h4 style="margin: 0;">1. FILING FEE</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>790</td> <td>201</td> <td>395</td> <td>Utility filing fee</td> <td style="border: 1px solid black; text-align: center;">790.</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td>107</td> <td>540</td> <td>207</td> <td>270</td> <td>Plant filing fee</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td>108</td> <td>790</td> <td>208</td> <td>395</td> <td>Reissue filing fee</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td style="border: 1px solid black; text-align: center;">(\$)790.</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px;"> <h4 style="margin: 0;">2. CLAIMS</h4> <table style="width: 100%; font-size: small;"> <tr> <td>Total Claims</td> <td style="border: 1px solid black; text-align: center;">22</td> <td>-20 =</td> <td style="border: 1px solid black; text-align: center;">2</td> <td>Extra</td> <td style="border: 1px solid black; text-align: center;">22</td> <td>Fee from below</td> <td style="border: 1px solid black; text-align: center;">44.</td> <td>Fee Paid</td> </tr> <tr> <td>Independent Claims</td> <td style="border: 1px solid black; text-align: center;">17</td> <td>-3 =</td> <td style="border: 1px solid black; text-align: center;">14</td> <td></td> <td style="border: 1px solid black; text-align: center;">82</td> <td></td> <td style="border: 1px solid black; text-align: center;">1148.</td> <td></td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <table style="width: 100%; font-size: small; margin-top: 10px;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>22</td> <td>203</td> <td>11</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>82</td> <td>202</td> <td>41</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependant claim</td> <td></td> </tr> <tr> <td>109</td> <td>82</td> <td>209</td> <td>41</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>22</td> <td>210</td> <td>11</td> <td>Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td style="border: 1px solid black; text-align: center;">(\$)1,192.</td> </tr> </tbody> </table> </div>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	101	790	201	395	Utility filing fee	790.	106	330	206	165	Design filing fee		107	540	207	270	Plant filing fee		108	790	208	395	Reissue filing fee		114	150	214	75	Provisional filing fee		SUBTOTAL (1)					(\$) 790.	Total Claims	22	-20 =	2	Extra	22	Fee from below	44.	Fee Paid	Independent Claims	17	-3 =	14		82		1148.		Multiple Dependent Claims									Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	103	22	203	11	Claims in excess of 20		102	82	202	41	Independent claims in excess of 3		104	270	204	135	Multiple dependant claim		109	82	209	41	Reissue independent claims over original patent		110	22	210	11	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$) 1,192.	<h3 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h3> <h4 style="margin: 0;">3. 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146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																																																																																																																																																																																																																												
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																																																																																																																																																																																																																																												
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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	FERNANDA M. FIORDALISI			Reg. Number	20,938
Signature	Ferd M Fiord			Date	4/9/98
				Deposit Account User ID	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

09057634-040998

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1c518 U.S. PTO
09/057684
04/09/98

APPLICANT: HIROSHI HASEGAWA, ET AL
SERIAL NO.: (CONTINUATION-IN-PART OF SER. NO. 08/539,001)
FILED: (OCTOBER 4, 1995)
FOR: FLUID COMPOSITIONS CONTAINING REFRIGERATOR OILS AND
CHLORINE-FREE FLUOROCARBON REFRIGERANTS
GROUP: BA-22580 (CONTINUATION-IN-PART OF BA-22356)
CASE:
EXAMINER:

CERTIFICATE OF MAILING BY EXPRESS MAIL
UNDER THE PROVISIONS OF 37 C.F.R. 1.10

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

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on April 9, 1998 by Express Mail No.
EM564188157US

Respectfully submitted,

BUCKNAM AND ARCHER

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